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STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: Redfield Press		2. DATE: 9-30-19
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $ 5.800
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 16 E 7th Ave Po Bx 440 Spink County Redfield SD 57469		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 16 E 7th ave Po Bx 440 Redfield, SD 57469		
6. FULL NAME OF PUBLISHER: Mark E Davis		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
News Media Corporation	211 Hwy 38 E Rochelle, IL 61068

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

American Bank + Trust 1820 Dakota Ave S. Huron SD 57350

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)		
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	606	606
2. Mail Subscription (Paid and or requested)	950	950
3. Paid Electronic Copies	94	96
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1650	1652
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	12	12
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1662	1664
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	332	330
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1994	1994

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Mark E Davis — (Signature)

Publisher — (Title)

State of South Dakota)
§
County of Beadle)

Sworn to before me this 1 day of Oct, 2019

Notary Public

My commission expires: 3/11/22

(Seal)

Form: SOS REC 051 9/2016

John C. + Cynthia Tompkins 211 Hwy 38 E Rochelle, IL 61068
R. Michael Tompkins 211 Hwy 38 E Rochelle, IL 61068
John W. + Amy Tompkins 211 Hwy 38 E Rochelle, IL 61068
Trina McNeilly 211 Hwy 38 E Rochelle, IL 61068